

# National Provider Identifier

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## The NPI Final Rule published January 23, 2004

- Adopts the NPI as the standard unique identifier for health care providers
- Establishes the functions of the National Provider System (NPS), now referred to as the National Provider and Payer Enumeration System (NPPES)
- Places requirements on health plans, health care clearinghouses, and covered health care providers

## Who must comply with the HIPAA standards?

### **"Covered entities"**

- Health plans (e.g., Medicare, Medicaid, Tricare/CHAMPUS, DVA, BC/BS Plans, HMOs, and all other entities that meet "health plan" definition in 45 CFR 160.103)
- Health care clearinghouses
- Health care providers who conduct standard transactions
- Definitions for each type of covered entity are found in 45 CFR section 160.103. Federal health programs.

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## What are the HIPAA standard transactions?

- Institutional, Professional and Dental claims, and retail pharmacy drug claims, COB (X12N, NCPDP)
- Payment & Remittance Advice (X12N, NCPDP)
- Eligibility Inquiry/Response (X12N, NCPDP)
- Claim Status Inquiry/Response (X12N)
- Referral/Prior Authorization (X12N, NCPDP)
- Premium Payment (X12N)
- Enrollment/Disenrollment in Health Plan (X12N)

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## Important dates for NPI

- 1/23/2004: NPI Final Rule published
- 5/23/2005: Effective date (*Health care providers can begin applying for NPIs*)
- 5/23/2007: Compliance date for all covered entities except small health plans
- 5/23/2008: Compliance date for small health plans

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## The NPI

- 10 positions, all numeric, check-digit in 10<sup>th</sup> position, no embedded intelligence
- Expected to last indefinitely
- Supply to exceed demand
- Never expires
- May be deactivated/reactivated

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## Who is eligible for an NPI?

- Any "health care provider" (45 CFR 160.103)  
***Individuals*** (physicians, dentists, pharmacists, therapists, technicians, aides, dental hygienists etc.)  
***Organizations*** (hospitals, nursing homes, group practices, incorporated individuals, clinical labs pharmacies, etc.)  
Subparts of covered organization health care providers

Non-health care providers are not eligible

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## Who is REQUIRED by the Final Rule to obtain an NPI?

- Covered health care providers (individuals and organizations)
- Subparts of covered organization health care providers (COHCPs) that conduct any of the standard transactions
  - COHCPs designate subparts based on requirement/need for them to have NPIs
  - COHCPs ensure that subparts obtain/use NPIs

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## A subpart is a component of a COHCP and...

- Is not a legal entity, and cannot be a person
- Furnishes health care
- Might...
  - Conduct standard transactions (if so, it **must** have an NPI)
  - Be required by Federal regulations to have a Federal billing number (e.g., a Medicare billing number)
  - Be certified/licensed separately from COHCP
  - Have a location different from COHCP
  - Have a Taxonomy Code different from COHCP
  - Be a member of a chain (COHCP might be HQ)

*Many Medicare Part A providers and DME suppliers are subparts of COHCPs.*

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## NPI and covered healthcare provider

- Will I become a covered health care provider if I receive an NPI?.....
- No

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## The National Plan and Provider Enumeration System (NPPES)

- National Provider System (NPS) is synonymous with NPPES
- New name reflects future functionality to also enumerate health plans
- Developed under CMS contract
- Uniquely identifies health care providers and subparts and assigns them NPIs
- Sets up and maintains a record for every enumerated health care provider and subpart
- Creates reports and output files

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## The Enumerator

- Handles paper NPI Application/Update Forms
- Resolves problems, answers questions
- CMS awarded contract to Fox Systems

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## NPI Application/Update Form: A multi-purpose form

CMS-10114 will be used to:

1. Apply for an NPI
  2. Furnish updates when data change
  3. Deactivate an NPI
- Form consists of data entry portion, Privacy Act Statement, Instructions
  - Form approved by OMB
  - View and download at [www.cms.hhs.gov/forms](http://www.cms.hhs.gov/forms)

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## Obtaining NPIs

- Health care provider or subpart submits application over the web (begins May 23, 2005)  
**OR**
- Health care provider or subpart submits paper application to the Enumerator (begins July 2005)  
**OR**
- Professional organization or covered entity submits file containing application data for many health care providers or subparts (begins late 2005)
  - Known as Electronic File Interchange (EFI)
  - Health care providers would not have to complete their own applications

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## Obtaining NPIs (cont.)

- NPPES uses data on application or in Electronic File Interchange (EFI) to ensure unique identification
  - SSN validation, address verification, duplicate check
  - Edits to detect incomplete and illogical data
- If application is OK, health care provider or subpart is notified of NPI
- If application is not OK, Enumerator communicates with health care provider or subpart

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## What information must be furnished to obtain an NPI?

- The minimum data needed to ensure unique identification
  - Basic and identifying information, certification statement, signatures, contact person
  - More information will be required if necessary to establish uniqueness
- Federal Register contains list of data elements

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## The NPPES will not...

- Link subparts to covered organization health care providers or vice versa
- Capture memberships in groups
- Capture multiple practice location addresses
- Know whether or not a health care provider is a covered entity

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## Something to keep in mind about compliance...

Covered entities may comply prior to the compliance dates, which means...

- A health plan may require the use of NPIs prior to the 5/23/07 compliance date.
  - FR recommends that health care providers and subparts have their NPIs at least 6 months before date required to be used
- Could adversely affect payments if health care providers or subparts are not ready

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## Health plans...

- May not require an enumerated health care provider or subpart to obtain an additional NPI
- Will need to know about subpart designations and NPI assignments; may ask health care providers and subparts to disclose their NPIs
- Are not prohibited from requiring their enrolled health care providers (if they are eligible) to obtain and use NPIs

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## An NPI will not...

- Be assigned to entities that do not meet "health care provider" definition in regulation
- Eliminate or replace the provider enrollment processes conducted by health plans
- Guarantee reimbursement by any health plan
- Convey covered entity status
- Assure licensure or credentials
- Require a health care provider or a subpart to conduct standard transactions

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## The use of the NPI in standard transactions...

- NPI will be the only identifier an enumerated health care provider or subpart will use to identify itself as a health care provider in standard transactions after the compliance date
- NPI will simplify standard transactions for all covered entities

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## FR requirements: covered health care providers

- Obtain NPIs for themselves and any subparts that conduct standard transactions
- Use their NPIs to identify themselves as health care providers in standard transactions
- Disclose their NPIs upon request to entities that need them for standard transactions
- Furnish updates to NPPES within 30 days of changes
- Require Business Associates to use all NPIs appropriately
- If the health care provider is a covered organization health care provider with subparts: ensure subparts comply with above requirements

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## FR requirements: health plans and health care clearinghouses

- Must use the NPI of any health care provider or subpart that has been assigned an NPI to identify it in all standard transactions where its identifier is required
- A health plan may not require an enumerated health care provider to obtain an additional NPI

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## Use of the Taxpayer Identifying Number (TIN)

- TIN established by regulation to identify a taxpayer (SSN, EIN or ITIN)
- Required in many standard transactions to identify entities (including health care providers or subparts) as taxpayers
- When TIN is to be reported in standard transactions for its regulatory purpose, it must be used. *NPI cannot be used as a substitute for a TIN.*

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## Implementation activities

- Check CMS website for updates
- Watch for instructions/communications from HHS/CMS, trading partners, professional associations
- Determine impact of NPI on contracts, systems, processes, files
- Develop implementation plans and discuss them with trading partners, vendors, business associates
- Identify/resolve issues early

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## CMS Resources

- [www.cms.hhs.gov/hipaa/hipaa2](http://www.cms.hhs.gov/hipaa/hipaa2)  
Select HIPAA Administrative Simplification and check latest news
  - Administrator's May 6 letter to all providers
  - Roundtable news
  - Regulations, FAQs
  - Regulations and Outreach Listservs
  - Outreach materials, announcements
- HIPAA Hotline 1-866-282-0659
- [AskHIPAA@cms.hhs.gov](mailto:AskHIPAA@cms.hhs.gov)

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## CMS Resources

- You can view a web-based training tool on the NPI at:
- <http://www.cms.hhs.gov/medlearn/npi/npiviewlet.asp>
- Join a CMS-sponsored national HIPAA NPI call !
- CMS will host a National HIPAA (NPI) Roundtable conference call on June 22, 2005 at 2:00 PM ET. The call in number is 1-877-203-0044 and the identification number is 5580682. No cost or registration required.

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## CMS Fee-for-Service Provider Resources

- [www.cms.hhs.gov/providers](http://www.cms.hhs.gov/providers)  
Check the MedLearn Matters article about the National Provider Identifier (Article # SE0528)

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## NPI Enumeration Resources

The following resources are available, beginning May 23, 2005:

- You may go to <https://nppes.cms/hhs/gov> to apply for an NPI.
- You may contact the Enumerator Customer Service at:
  - 1-800-465-3203
  - TTY 1-800-692-2326
  - [customerservice@NPIenumerator.com](mailto:customerservice@NPIenumerator.com)

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## Thank You

For Questions, you may contact

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